DATE : 10/16/07

Paper No.: _____

TO SPE OF : ART UNIT 1636

SUBJECT : Request for Certificate of Correction on Patent No.: 6844169

A response is requested with respect to the accompanying request for a certificate of correction.

Please complete this form and return with file, within **7 days** to:
Palm location **7580, Certificates of Correction Branch – South Tower – 9A22**
If response is for an IFW, **return to employee (named below) via PUBSCofC Team in MADRAS.**

With respect to the change(s) requested, correcting Office and/or Applicant's errors, should the patent read as shown in the certificate of correction (COCIN)? No new matter should be introduced, nor should the scope or meaning of the claims be changed.

Valerie Jackson

Thank You For Your Assistance

Certificates of Correction Branch
Tel. No. 703-308-9390 ext. 114

The request for issuing the above-identified correction(s) is hereby:

Note your decision on the appropriate box.

☐ **Approved**   All changes apply.

☐ **Approved in Part**   Specify below which changes **do not** apply.

☐ **Denied**   State the reasons for denial below.

Comments:

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_____

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_____

SPE   Art Unit